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| Substitute Form PTO-1449<br>(Modified)  |               | U.S. Department of Commerce<br>Patent and Trademark Office |          | Attorney's Docket No.<br><b>102286.408CON</b> |          | Application No.<br><b>09/778,926</b> |  |
| <b>Information Disclosure Statement</b><br><b>by Applicant</b><br>(Use several sheets if necessary) |               |  |          | Applicant<br><b>Collinge et al.</b>           |          |                                      |  |
|   |               |  |          | Filing Date<br><b>February 6, 2001</b>        |          | Group Art Unit<br><b>1634</b>        |  |
| Examiner<br>Initial   | Patent Number | Issue Date   | Patentee | Class   | Subclass | Filing Date<br>If Appropriate        |  |
|   |               |  |          |   |          |                                      |  |
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| Examiner<br>Initial | Document<br>Number | Publication<br>Date | Country or<br>Patent Office | Class | Subclass | Translation |    |
|---------------------|--------------------|---------------------|-----------------------------|-------|----------|-------------|----|
|                     |                    |                     |                             |       |          | Yes         | No |
|                     |                    |                     |                             |       |          |             |    |
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| Examiner<br>Initial | Document   |
|---------------------|--|
| <b>AC A1</b>        | Hsich, Gary, et al, "The 14-3-3 Brain Protein in Cerebrospinal Fluid as a Marker for Transmissible Spongiform Encephalopathies," The New England Journal of Medicine, 1996, Vol., 335, No. 13, pgs. 924-931. |
| <b>A2</b>           |  |
| <b>A3</b>           |  |
| <b>A4</b>           |  |

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| Examiner Signature<br><i>Arum K. Chakrabarti</i>   | Date Considered<br><i>8/21/03</i> |
| EXAMINER: Initials citation considered. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. |                                   |

Substitute Disclosure Form (PTO-1449)